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PTO/SB/21 (09-04)
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

, приносион на пре	10/606,016
Filing Date	June 24, 2003
First Named Inventor	Benjamin FRYDMAN
Art Unit	1623
Examiner Name	M. Fedowitz
Attorney Docket Number	578562000800

	ENCLOSURES (Check all that apply)							
X Fee Transmitt (1 page in dup		Drawing(s)		After Allowance Communication to TC				
Fee Attached		Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences				
Amendment/R	Reply	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)				
After Fin	nal	Petition to Convert to a Provisional Application		Proprietary Information				
Affidavit	ts/declaration(s)	Power of Attorney, Revocation Change of Correspondence		Status Letter				
Extension of T	Time Request	Terminal Disclaimer		X Other Enclosure(s) (please Identify below):				
Express Abandonment Request		Request for Refund		Form PTO/SB/08a/b (1 page) Return Receipt Postcard				
X Information Disclosure Statement (3 pages)		CD, Number of CD(s)						
Certified Copy of Priority Document(s)		Landscape Table on CD						
Reply to Missing Parts/ Incomplete Application		Remarks						
Reply to	Missing Parts under 1.52 or 1.53							
	SIGNATU	JRE OF APPLICANT, ATTOR	RNEY, OR	AGENT				
Firm Name MORRISON & FOERSTER LLP (Customer No. 25226)								
Signature	Signature Much Med							
Printed name R	Printed name Robert K. Cerpa							
Date Se	eptember 2, 2005		Reg. No.	39,933				

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Dated: September 2, 2005

Signature:

(Georgina Matos)



PTO/SB/17 (12-04v2)
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL				Complete if Known Application Number 10/606,016				
						June 24, 2003		
				First Named Inventor Benjamin FRYD		DMAN		
	For FY 2005					1. Fedowitz		
X Applican	t claims small entity stat	tus. See 37 CFF	R 1.27	Art Unit		623		
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METHOD OF	PAYMENT (check							
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FEE CALCUI	ATION			-				<u></u>
1. BASIC FILIN	G, SEARCH, AND E	XAMINATION	FEES					
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Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CL		100	Ū	v	v	· ·	Si	mall Entity
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4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)								
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00								
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SUBMITTED BY Signature	As.	M		Registration No.	39,933	Telephone	(650) 813-	5715
	Pohort V. Corre			(Attorney/Agent)	00,000	+	• •	
Name (Print/Type)	Robert K. Cerpa					Date S	September 2	£, ZUUD

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Georgina Matos)

ted: September 2, 2005 Signature

matos

Patent Docket No. 578562000800

SEP 0 2 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent Application of: enjamin FRYDMAN et al.

Serial No.: 10/606,016

Filing Date: June 24, 2003

For: PORPHYRIN-POLYAMINE

CONJUGATES FOR CANCER

THERAPY

Examiner: M. Fedowitz

Group Art Unit: 1623

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. § 1.97 & 1.98

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Dear Sir:

Pursuant to 37 C.F.R. §1.97 and § 1.98, Applicants submit for consideration in the above-identified application the documents listed on the attached Form PTO/SB/08a/b. The Examiner is requested to make these documents of record.

This Supplemental Information Disclosure Statement is submitted:

With the application; accordingly, no fee or separate requirements are required.
□ Before the mailing of a first Office Action after the filing of a Request for Continued Examination under § 1.114. However, if applicable, a certification under 37 C.F.R. § 1.97 (e)(1) has been provided.

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	Withi	n three months of the application filing date or before mailing of a first Office Action
	on the	merits; accordingly, no fee or separate requirements are required. However, if
	applic	able, a certification under 37 C.F.R. § 1.97 (e)(1) has been provided.
\boxtimes	After	receipt of a first Office Action on the merits but before mailing of a final Office Action
	or No	tice of Allowance.
		A fee is required. A check in the amount of is enclosed.
	\boxtimes	A fee is required. Accordingly, a Fee Transmittal form (PTO/SB/17) is attached to
		this submission in duplicate.
		A Certification under 37 C.F.R. § 1.97(e) is provided above; accordingly; no fee is
		believed to be due.
	After	mailing of a final Office Action or Notice of Allowance, but before payment of the
	issue	fee.
		A Certification under 37 C.F.R. § 1.97(e) is provided above and a check in the
		amount of is enclosed.
		A Certification under 37 C.F.R. § 1.97(e) is provided above and a Fee Transmittal
		form (PTO/SB/17 is attached to this submission in duplicate.)

Applicants would appreciate the Examiner initialing and returning the Form PTO/SB/08a/b, indicating that the information has been considered and made of record herein.

The information contained in this Supplemental Information Disclosure Statement under 37 C.F.R. § 1.97 and § 1.98 is not to be construed as a representation that: (i) a complete search has been made; (ii) additional information material to the examination of this application does not exist; (iii) the information, protocols, results and the like reported by third parties are accurate or enabling; or (iv) the above information constitutes prior art to the subject invention.

In the unlikely event that the transmittal form is separated from this document and the Patent and Trademark Office determines that an extension and/or other relief (such as payment of a fee under 37 C.F.R. § 1.17 (p)) is required, Applicants petition for any required relief including extensions of time and authorize the Commissioner to charge the cost of such petition and/or other

fees due in connection with the filing of this document to **Deposit Account No. 03-1952** referencing <u>578562000800</u>.

Dated: September 2, 2005

Respectfully submitted,

Robert K. Cerpa

Registration No.: 39,933

MORRISON & FOERSTER LLP

755 Page Mill Road

Palo Alto, California 94304-1018

(650) 813-5715



Complete if Known Substitute for form 1449/PTO 10/606,016 Application Number Filing Date June 24, 2003 INFORMATION DISCLOSURE Benjamin FRYDMAN First Named Inventor STATEMENT BY APPLICANT Art Unit 1623 (Use as many she ets as necessary) M. Fedowitz Examiner Name 578562000800 1 Attorney Docket Number Sheet 1

U.S. PATENT DOCUMENTS						
Examiner Initials*	Cite No.1	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	
	1.	US-6,114,321-A	09-05-2000	Platzek et al.		
	2.	US-6,906,050-B2	06-14-2005	Robinson		

FOREIGN PATENT DOCUMENTS							
Examiner Initials*	Cite No.1	Foreign Patent Document Country Code ³ -Number Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
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*EXAMINER: Initial if information considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. Applicant's unique citation designation number (optional). See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. Senter Office that issued the document, by the two-letter code (WIPO Standard ST.3). For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. Nind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. Applicant is to place a check mark here if English language Translation is attached.

NON PATENT LITERATURE DOCUMENTS					
Examiner Initials	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²		

^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Examiner	•	Date	
Signature		Considered	

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.